

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Ichiro Oshima

Attorney Docket No.: MES1P045/
PF99E881/2-PUS

Application No.: 09/937,111

Examiner: Duran, Arthur D.

Filed: September 19, 2001

Group: 3622

Title: GIFT MEDIATION SYSTEM AND GIFT
MEDIATION METHOD

Confirmation No.: 4704

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted by facsimile to fax number 703-872-9306 to the U.S. Patent and Trademark Office on December 30, 2004.

Signed: 

Laura M. Dean

AMENDMENT A TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:


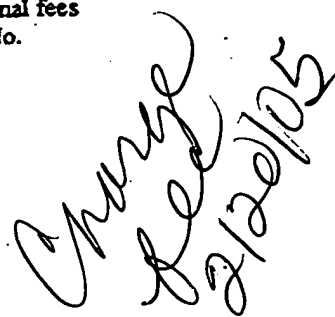
Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	26	MINUS	26	0	x 25 = 0	x 50 = 0
Independent Claims	5	MINUS	5	0	x 100 = 0	x 200 = 0
Multiple Dependent Claim Present and Fee Not Previously Paid					\$180.00	\$360.00
Total					\$0	\$0

02/22/2005 SW ☒ 00000504 500388 023511 Action.
01 FC:2253 ☒ 510.00 Applicant(s) hereby petition for a THREE month extension(s) of time to respond to the

Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.

☒ Please charge the required fees of \$510.00 for a 3 month extension of time, and any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. MES1P045).Respectfully submitted,
BEYER WEAVER & THOMAS, LLP
Alan S. Hodcs
Reg. No. 38,185P.O. Box 70250
Oakland, CA 94612-0250

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	26 minus 20 =	6
INDEPENDENT CLAIMS	5 minus 3 =	2
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE	OR	RATE	FEE
BASIC FEE	420	OR	BASIC FEE	
X\$ 9=	54	OR	X\$18=	
X40=	80	OR	X80=	
+135=		OR	+270=	
TOTAL	554	OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	26	Minus 26	=
Independent	3	Minus 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	=
Independent		Minus	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	=
Independent		Minus	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.